

No. Rev (DMC) -C-20-2/2020(Covid-19)
Government of Himachal Pradesh,
Department of Revenue (DM)

From

The Principal Secretary (Rev-DM) to the
Government of Himachal Pradesh,
Shimla-2

To

1. All the Administrative Secretaries to the
Government of Himachal Pradesh.
2. All the Head of Department in HP
3. All the Divisional Commissioners in HP
4. All the Deputy Commissioners in HP
5. All the Corporation /Boards/ Autonomous Bodies /
Agencies in Himachal Pradesh.

Dated Shimla-2, the 26th August, 2021

Subject

Provision of financial assistance to those working in
different capacities and in case of their death due to
COVID-19.

Sir,

In Continuation to this department letter of even number dated 01-06-2020 on the subject cited above, vide which financial assistance security to all such employees and frontline workers who are involved in response , relief and containment measures of COVID -19 was allowed as ex-gratia of Rs. 50.00 lakh out of HPSDMA Covid -19 State Disaster response fund to the next kin of official /officer of State Government. This department has now drafted application form and detailed guidelines to facilitate submission of new cases under this financial assistance scheme for persons who dies due to COVID-19 diseases while on specific Covid-19 duties. The copy of same is enclosed herewith for your ready reference.

You are therefore requested that now onwards new cases of ex-gratia under HPSDMA COVID-19 SDRF be submitted in prescribed application format alongwith all required documents.

These instructions may please be brought to the notice of all concerned working under you.

Your faithfully,

(Sudesh Kumar Mokhta)

Director -cum-Special Secretary (Rev-DM) to the
Government of Himachal Pradesh.



Himachal Pradesh State Disaster Management Authority (HPSDMA)

Government of Himachal Pradesh

APPLICATION FORM

(Financial Assistance under HPSDMA COVID-19 SDRF to those working in different capacities and their COVID-19 related death due to their specific COVID-19 duties)

1. Details of Deceased Person who died due to COVID-19

- a) Full name (Ms./Mr.)
- b) Father's name
- c) Age at last birthday
- d) Sex
- e) Address
- f) Profession/occupation

2. Death Details:

- a) Date and Time of Death:
- b) Date of Laboratory diagnosis of COVID19

3. Details of COVID-19 specific duties & its period:

4. Head of Department & Revenue Authority (DC/SDM/Tehsildar) certificate related to specific COVID-19 duties:

5. Details of legal heirs of the deceased:

6. Bank details of legal heirs:

6.1	Name of the Legal Heir	A	B	C	Any other LH
6.2	Relationship with the Deceased				
6.3	Bank Name				
6.4	Branch and address				
6.5	Bank Account No.				
6.6	Bank Account Type				
6.7	IFSC Code				
6.8	MICR Code				

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I, _____, hereby declare that the foregoing statements are true in all respect and that I, the claimant, have not attempted to conceal from the Himachal Pradesh Government anything which it ought to be made acquainted. I, agree that if I have made, or in any further declaration the HP Government may require, shall make any false or fraudulent statement or any suppression, concealment or untrue averment whatever, the claim shall be void and my right to compensation forfeited and am willing, if required to make a Statutory Declaration before a Justice of the Peace of the truth of the whole of the foregoing statement or any other statement I, may make a connection with this claim.

	Claimant	Witness
Name:		
Address:		
Contact number:		
Date:		
Signature:		

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Place and Date:

Signature of the Claimant

Guidelines for Financial Assistance to those Working in Different Capacities: In case of their Death due to COVID-19

1. All the officers/officials working in State Government departments as well as Corporations, Boards, Autonomous Bodies and various State government agencies who are not covered under PM Garib Kalyan Yojna - Insurance Scheme and are working in different capacities for treatment/containment/management/response and relief works of COVID-19 and in case of their death due to COVID-19 epidemic, whether regular, outsourced, contractual, daily wagers, and employees of Societies engaged in sanitation work are eligible for one-time ex-gratia financial assistance of Rs. 50.00 lakh subject to the following conditions: -
 - a. They should be on specific COVID-19 related duty. Merely attending to official duty during COVID-19 epidemic would not qualify for this ex-gratia grant, which cannot be construed as frontline duty.
 - b. They became infected with COVID-19 disease in the specific Covid-19 duty period or within 14 days after the duty period.
 - c. Death occurred due to COVID-19 or complications related to COVID-19 pandemic.
2. **The ex-gratia will be distributed in equal share among primary legal heirs of the deceased.**
 - Spouse
 - Sons & Unmarried daughters
 - Dependent parentsIf none of these, then Secondary legal heirs.
3. **Need to submit following documents along with Claim Form: -**
 - I. Identity proof of Deceased (Certified copy)
 - II. Identity proof of the Claimant (Certified copy)
 - III. Proof of relationship between the Deceased and the Claimant (Certified copy)
 - IV. Laboratory Report certifying having tested Positive for COVID-19 (in Original or Certified copy)
 - V. Death summary by the Hospital where death occurred (in case death occurred in hospital) (Certified copy).
 - VI. Death Certificate (in Original)
 - VII. Certificate by the Healthcare institution/ organization/ office.
 - VIII. Legal Heirs Certificate
 - IX. Specific COVID-19 duties certificate by HOD counter signed by the Revenue authority (DC/SDM/Tehsildar)

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4. Claim Certifying Authority

- a. Head of Department after recommendation by concerned Revenue authority (DC/SDM/Tehsildar)

5. Claim approval and Grievance Redressal Committee

Once the claim is received to Himachal Pradesh State Disaster Management Authority for approval by HOD, it will be examined and approved by the following Claim Approval Committee:

- Chief Secretary, Government of Himachal Pradesh – Chairperson
- Principal Secretary (Revenue) – Member
- Director-cum-Special Secretary (Rev-DM) – Member
- Mission Director (National Health Mission, HP) – Member
- Finance Department Representative – Member

The above Committee shall also act as Grievance Redressal Committee for deciding any grievance or representation related to these financial assistance provisions.

6. Final Claim Sanction Authority

- a. Hon'ble Chief Minister-cum-Chairman, HPSDMA COVID-19 SDRF.

(Sudesh Kumar Mokhta)
Director -cum-Special Secretary (Rev-DM) to the
Government of Himachal Pradesh.